

providing an ablation device having a first jaw, a second jaw and at least one ablating portion on the first jaw, the first jaw being movable relative to the second jaw to clamp cardiac tissue therebetween;

forming an opening in a patient's body;

forming an opening in the pericardium;

moving the ablation device through the openings in the patient's body and pericardium;

clamping a portion of the patient's heart between the first and second jaws, the at least one ablating portion being positioned to form an elongate lesion in the patient's heart to electrically isolate tissue; and

ablating tissue with the at least one ablating portion to form the elongate lesion.

22. The method of claim 21, wherein:

the clamping step is carried out by inserting at least one of the first and second jaws into the patient's heart so that the ablation device clamps the portion of the patient's heart between an endocardial surface and an epicardial surface.

23. The method of claim 22, wherein:

the clamping step is carried out by using a purse-string suture to maintain hemostasis around the jaw which is inserted into the patient's heart.

24. The method of claim 21, wherein:

the providing step is carried out with the first jaw pivoting relative to the second jaw.

25. The method of claim 21, wherein:

the providing step is carried out with the ablating portion extending along a length of the first jaw.